

Senate File 2201

H-8625

Amend Senate File 2201, as amended, passed, and reprinted by the Senate, as follows:

1. Page 11, after line 9, by inserting:

<Sec. _____. **NEW SECTION. 514C.26 Mental illness and substance abuse treatment coverage for veterans.**

1. Notwithstanding the uniformity of treatment requirements of section 514C.6, a group policy or contract providing for third-party payment or prepayment of health or medical expenses issued by a carrier, as defined in section 513B.2, or by an organized delivery system authorized under 1993 Iowa Acts, chapter 158, shall provide coverage benefits to an insured who is a veteran for treatment of mental illness and substance abuse if either of the following is satisfied:

a. The policy or contract is issued to an employer who on at least fifty percent of the employer's working days during the preceding calendar year employed more than fifty full-time equivalent employees. In determining the number of full-time equivalent employees of an employer, employers who are affiliated or who are able to file a consolidated tax return for purposes of state taxation shall be considered one employer.

b. The policy or contract is issued to a small employer as defined in section 513B.2, and such policy or contract provides coverage benefits for the treatment of mental illness and substance abuse.

2. Notwithstanding the uniformity of treatment requirements of section 514C.6, a plan established pursuant to chapter 509A for public employees shall provide coverage benefits to an insured who is a veteran for treatment of mental illness and substance abuse as defined in subsection 3.

3. For purposes of this section:

a. "*Mental illness*" means mental disorders as defined by the commissioner by rule.

b. "*Substance abuse*" means a pattern of pathological use of alcohol or a drug that causes impairment in social or occupational functioning, or that produces physiological dependency evidenced by physical tolerance or by physical symptoms when the alcohol or drug is withdrawn.

c. "*Veteran*" means the same as defined in section 35.1.

4. The commissioner, by rule, shall define "*mental illness*" consistent with definitions provided in the most recent edition of the American psychiatric association's diagnostic and statistical manual of mental disorders, as the definitions may be amended

1 from time to time. The commissioner may adopt the
2 definitions provided in such manual by reference.

3 5. This section shall not apply to accident only,
4 specified disease, short-term hospital or medical,
5 hospital confinement indemnity, credit, dental, vision,
6 Medicare supplement, long-term care, basic hospital
7 and medical-surgical expense coverage as defined
8 by the commissioner, disability income insurance
9 coverage, coverage issued as a supplement to liability
10 insurance, workers' compensation or similar insurance,
11 or automobile medical payment insurance, or individual
12 accident and sickness policies issued to individuals or
13 to individual members of a member association.

14 6. A carrier, organized delivery system, or plan
15 established pursuant to chapter 509A may manage the
16 benefits provided through common methods including
17 but not limited to providing payment of benefits
18 or providing care and treatment under a capitated
19 payment system, prospective reimbursement rate system,
20 utilization control system, incentive system for the
21 use of least restrictive and least costly levels of
22 care, a preferred provider contract limiting choice of
23 specific providers, or any other system, method, or
24 organization designed to assure services are medically
25 necessary and clinically appropriate.

26 7. a. A group policy or contract or plan covered
27 under this section shall not impose an aggregate annual
28 or lifetime limit on mental illness or substance abuse
29 coverage benefits unless the policy or contract or
30 plan imposes an aggregate annual or lifetime limit
31 on substantially all medical and surgical coverage
32 benefits.

33 b. A group policy or contract or plan covered
34 under this section that imposes an aggregate annual
35 or lifetime limit on substantially all medical
36 and surgical coverage benefits shall not impose an
37 aggregate annual or lifetime limit on mental illness
38 or substance abuse coverage benefits which is less
39 than the aggregate annual or lifetime limit imposed
40 on substantially all medical and surgical coverage
41 benefits.

42 8. A group policy or contract or plan covered
43 under this section shall at a minimum allow for
44 thirty inpatient days and fifty-two outpatient visits
45 annually. The policy or contract or plan may also
46 include deductibles, coinsurance, or copayments,
47 provided the amounts and extent of such deductibles,
48 coinsurance, or copayments applicable to other medical
49 or surgical services coverage under the policy or
50 contract or plan are the same. It is not a violation

1 of this section if the policy or contract or plan
2 excludes entirely from coverage benefits for the cost
3 of providing the following:
4 a. Care that is substantially custodial in nature.
5 b. Services and supplies that are not medically
6 necessary or clinically appropriate.
7 c. Experimental treatments.
8 9. This section applies to third-party payment
9 provider policies or contracts and plans established
10 pursuant to chapter 509A delivered, issued for
11 delivery, continued, or renewed in this state on or
12 after January 1, 2011.>
13 2. Title page, line 5, after <associations,> by
14 inserting <special health and accident insurance
15 coverages,>
16 3. By renumbering as necessary.

ZIRKELBACH of Jones